



2023
City of Sevierville – Pickleball Spring League
Registration Form



Registration Fee: \$5.00 per player/per league – Cash or Check (make check payable to City of Sevierville)

Player Information:

First: _____ M.I.: _____ Last: _____

Address: _____ City: _____ Zip: _____

Primary Phone: _____ Email: _____

Gender: ___ M ___ F Date of Birth: ____/____/____

League: **Women’s Doubles** **Men’s Doubles** **Mixed Doubles**
(Please Check One)

Player Rating (Please Check One)

2.0-2.9

3.0+

ACTIVITY AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the City of Sevierville (the “City”) to participate in the above-described activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage that I may have, or that may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the City, its officers, employees, volunteers, and agents, from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the City or its officers, employees, volunteers, or agents. I understand that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk agreement is to be binding on my heirs and assigns. I agree to indemnify and to hold the City, and its officers, employees, volunteers, and agents free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I sustain while participating in said activity.

I have carefully read this Agreement, Waiver, and Release and fully understand its contents. I am aware that this is a release of liability and a contract between myself, and the City and I sign it of my free will.

I further understand that no medical insurance is provided and that no refunds will be given unless activities are changed or canceled by the City of Sevierville Parks and Recreation Department.

Signature of participant _____ Date _____

Print Name _____